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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

13281 U.S.PTO

121603

22390 U.S.PTO  
10/735646

121603

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		<b>Attorney Docket No.</b> 1351VAS-US <b>First Inventor</b> Uri ARNIN <b>Title</b> SPINAL DISC PROSTHESIS <b>Express Mail Label No.</b>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/1 7) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification [Total Pages 6] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure		<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450	
4. <input checked="" type="checkbox"/> Drawing(s)(35U.S.C. 113) [Total Sheets 2]		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>all necessary</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies	
5. Oath or Declaration [Total Sheets 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <i>Signed statement attached deleting Inventor(s)</i> <i>name in the prior application, see 37 CFR</i> <i>1.63(d)(2) and 1.33(b).</i>		<b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> ) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 <i>(b)(2)(13)(i). Applicant must attach form PTO/SB/35</i> <i>or its equivalent.</i> 17. <input type="checkbox"/> Other: _____	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-In-part (CIP)      of prior application No.: _____	
Prior application information: _____ Examiner: _____ Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
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Name (Print/Type)	David Klein	Registration No. (Attorney/Agent) 41,118	Date 16 December 2003
Signature	<i>David Klein</i>		

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<b>FEE TRANSMITTAL</b> <b>for FY 2004</b>		Complete if Known																																																																																																																													
Effective 10/10/2003. Patent fees are subject to annual revision.																																																																																																																															
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**SUBMITTED BY** (Complete if applicable)

Name (Print/Type)	David Klein	Registration No. (Attorney/Agent)	41,118	Telephone	972-8-949-5334
Signature	<i>David Klein</i>			Date	16 December 2003

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